GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:3638
ANSWERED ON:22.12.2004
DEATH RATE DURING CHILD BIRTH
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Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether as per estimates, death rate during child birth is the highest in India;

(b) if so, the reasons therefor;

(c) whether the Government proposes to chalk out any plan in this regard;

(d) if so, the details thereof;

(e) the State-wise and year-wise details of such deaths so for during the last three years;

(f) the State-wise number of health centres functioning at present to combat the emergency situation during childbirth especially in rural areas;

(g) whether steps are being taken to minimize such deaths and protect mothers during childbirths; and

(h) if so, the details thereof?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH & FAMILY WELFARE (SMT. PANABAKA LAKSHMI)

(a) to (h) According to the estimates of Maternal mortality published by WHO in their publication, `Maternal mortality- 2000`; 42 countries have maternal mortality ratio higher than that of India.

Maternal health care is an integral part of the Family Welfare Programme. Certain vertical interventions like the National Nutritional Anaemia Control Programme and Tetanus Immunization Programme for pregnant mothers have been going on under the Family Welfare Programme since 1977-78. In 1992, the nationwide Child Survival and Safe Motherhood (CSSM) (1992-97) was launched with World Bank support, for integrating various vertical interventions in the area of Maternal and Child Health.

The ongoing Reproductive and Child Health Programme is being implemented in all States/Union Territories since 1977 and aims at bringing down the maternal mortality and morbidity. Under this programme various interventions focused on reducing maternal deaths are being implemented. These are essential obstetric care; Emergency Obstetric Care; provision for referral transport for pregnant women with complication of pregnancy through Panchayats; provision of drugs and equipment at first referral units; provision of contractual staff like Additional Health Workers, Staff Nurses, Laboratory Technicians and hiring of Anesthetists from private sector for provision of emergency obstetric care. Funds are also being provided for schemes like 24 hours delivery services at selected Primary Health Centres and Community Health Centres; training of dais in all districts of EAG States and selected districts in order States where safe delivery rate is less than 30 per cent. Funds are also provided for organizing Reproductive and Child Health camps in remote and under utilized Primary Health Centres in all districts of EAG States.

Under the existing National Maternity Benefit Scheme, pregnant women belonging to BPL families are being assisted for better nutrition by providing cash assistance of Rs.500 for the first 2 live births. The scheme is being integrated with other ongoing maternal health schemes into a new and a more comprehensive scheme called Janani Suraksha Yojna with the objective of promoting institutional deliveries and nutrition of lactating mothers belonging to families Below Poverty Line (BPL) so as to reduce maternal, neo-natal and infant mortality.

The need for brining down MMR considerably and improving maternal health in general has also been strongly stressed in the National Population Policy-2000. This policy recommends a holistic strategy for brining about total inter-sectoral coordination at the grassroots level and also for involving the NGOs, civil society, Panchayati Raj Institutions and women`s groups in bringing down Maternal Mortality Ratios and Infant Mortality Rates.

State-wise data on the number of maternal deaths are not available. However, the maternal mortality rates as estimated for the country and the major States, by the Registrar General of India for the year 1997 and 1998 is given at Annexure-I.

There are 22926 Primary Health Centers functioning in the country which cater to normal deliveries and limited emergency conditions. State wise list is at Annexure-II. Serious emergency cases are referred to Community Health Centres/First Referral Units/District

Hospitals. Under the RCH Programme, States are being assisted in upgrading the existing Community Health Centers (CHCs)/Sub-Divisional Hospitals as First Referral Units (FRUs) for providing emergency care to pregnant women with complications of pregnancies and to sick children. 1724 such units were identified by the States under the CSSM Programme. These FRUs, however, did not become fully operational due to, among other reasons on account of lack of facilities for blood banking and shortage of essential manpower like Anesthetists etc. The Drugs and Cosmetics rules have since been amended to facilitate the setting up of blood storage centers at the FRUs and guidelines for this have been issued to the States. For meeting shortages of anesthetists, provision has been made for hiring them from the private sector. A programme for training of MBBS doctors in `Life Saving Skills for Emergency Obstetric Care` has been developed with the help of experts.

Annexure-I

Maternal Mortality Rate

India and Bigger States

(Source: RGI,SRS, 1997, 1998)

Major State (1997)	MMR (1998)	MMR
India	408	407
Andhra Pradesh	154	150
Assam	401	409
Bihar	451	452
Gujarat	29	28
Haryana	105	103
Karnataka	195	195
Kerala	195	198
Madhya Pradesh	498	498
Maharashtra	135	135
Orissa	361	367
Punjab	196	199
Rajasthan	677	670
Tamil Nadu	76	79
Uttar Pradesh	707	707
West Bengal	264	266

ANNEXURE-II

NUMBER OF PRIMARY HEALTH CENTRES, STATE-WISE

S.NO.	NAME OF THE STATE	NO. OF PRIMARY HEALTH CENTRES
1.	Andhra Pradesh	1386
2.	Arunachal Pradesh	78
3	Assam	610
4	Bihar	1648
5	Chhatisgarh	512
6	Goa	19
7	Gujarat	1048
8	Haryana	402
9	Himaschal Pradesh	302
10	Jammu & Kashmir	336
11	Jharkhand	561
12	Karnataka	1677
13	Kerala	941
14	Madhya Pradesh	1193
15	Maharashtra	1768
16	Manipur	72
17	Meghalaya	85
18	Mizoram	57
19	Nagaland	68
20	Orissa	1352
21	Punjab	484
22	Rajasthan	1674
23	Sikkim	24
24	Tamil Nadu	1436
25	Tripura	73

26	Uttar Pradesh	3551
27	Uttaranchal	228
28	West Bengal	1262
29	A&N Islands	19
30	Chandigarh	0
31	D&N Haveli	6
32	Daman & Diu	3
33	NCT Delhi	8
34	Lakshdweep	4
35	Pondicherry	39
Total	22926	